## 13-14184-reg

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B22A (Official Form 22A) (Chapter 7) (04/13)

In re Gregory Mitchell Owens	
Debtor(s) Case Number:	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
(If known)	☐ The presumption arises.
	■ The presumption does not arise.
	☐ The presumption is temporarily inapplicable.

## **CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME** AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	□ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	■ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and ☐ I remain on active duty /or/ ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	<ul> <li>b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>

calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.    Gross wages, salary, tips, bonuses, overtime, commissions.   S   S			Part II. CALCULATION OF M	ION	NTHLY INC	CON	IE FOR § 707(b)	(7) E	EXCLUSION	•	
b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under part other it purpose of evading the requirements of \$707(b)(2)(A) of the Bankruptcy Code." Complete only obtain A ("Debtor's for Lines 3-11.  c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  d. Married, filing jointly, Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the results on the appropriate column(s) of Line 4. If you operate more than one enter the difference in the appropriate column(s) of Line 4. If you operate more than one enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.  a. Gross receipts b. Ordinary and necessary business expenses S. E. Business income  Business, income Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.  a. Gross receipts b. Ordinary and necessary post of the business expenses of the debtor of the debtor's dependents, including child support paid for that purpose. Do not include almony or separate maintenance payments or amounts paid by your spouse for Column B is completed. Each regular payment should be reported in only one col								temer	nt as directed.		
"My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart of the property of the propert											
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B.   Ordinary and necessary business expenses   S					Debtor						
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domestic terrorism.											
a.	10										
b. \$ \$		<b> </b>			Debtor		Spouse	]			
								4			
Total and enter on Line 10				\$			<b>&gt;</b>	]			
						_ <u>_</u>		\$			
Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	11									\$	

12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.				
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.	\$			
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: b. Enter debtor's household size:	\$			
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.				
15	☐ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.				
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.				

	Complete Parts IV,	V, VI, and VII o	of this	statement only if requ	iired. (See Line 1	5.)
	Part IV. CALCULA	ATION OF CUR	RENT	MONTHLY INCOM	ME FOR § 707(b)(	(2)
16	Enter the amount from Line 12.					\$
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.					
	a. b. c. d. Total and enter on Line 17			\$ \$ \$ \$		\$
18	Current monthly income for § 70'	7(b)(2). Subtract Lin	e 17 fro	m Line 16 and enter the resu	ılt.	\$
				EDUCTIONS FROM s of the Internal Revenu		
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.			\$		
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom					
	Persons under 65 years of age Persons 65 years of age or or		or older			
	a1. Allowance per person b1. Number of persons c1. Subtotal		a2. b2. c2.	Allowance per person Number of persons Subtotal		\$
20A	the number that would currently be allowed as exemptions on your federal income tax return, plus the number of					
	any additional dependents whom yo	ou support.				\$

20B	Housing available the number any addebts see not enter a.			
	b.	IRS Housing and Utilities Standards; mortgage/rental expense  Average Monthly Payment for any debts secured by your	\$	
		home, if any, as stated in Line 42 Net mortgage/rental expense	Subtract Line b from Line a.	\$
21	Local S 20B do Standar content	\$		
	You are vehicle	Standards: transportation; vehicle operation/public transporte entitled to an expense allowance in this category regardless of and regardless of whether you use public transportation.  the number of vehicles for which you pay the operating expense	f whether you pay the expenses of operating a	
22A	include	ed as a contribution to your household expenses in Line 8.	ss of for which the operating expenses are	
	If you c Transpo Standar Census	\$		
22B	<b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)			\$
	you class vehicles			
23	(availab Monthl the resu	in Line a below, the "Ownership Costs" for "One Car" from the ble at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy c ly Payments for any debts secured by Vehicle 1, as stated in Linult in Line 23. <b>Do not enter an amount less than zero.</b>	court); enter in Line b the total of the Average ne 42; subtract Line b from Line a and enter	
		IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$	
	b.	1, as stated in Line 42	\$ Subtract Line b from Line a.	φ
	Local S	\$		
24	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amount less than zero.</b>			
		IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	
			Subtract Line b from Line a.	\$
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.			\$

26	Other Necessary Expenses: involuntary deductions for deductions that are required for your employment, such as Do not include discretionary amounts, such as voluntary	s retirement contributions, union dues, and uniform costs.	\$	
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.			
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.			
29	Other Necessary Expenses: education for employment the total average monthly amount that you actually expeneducation that is required for a physically or mentally chaproviding similar services is available.		\$	
30	Other Necessary Expenses: childcare. Enter the total archildcare - such as baby-sitting, day care, nursery and pre		\$	
31	Other Necessary Expenses: health care. Enter the total health care that is required for the health and welfare of your insurance or paid by a health savings account, and that is include payments for health insurance or health saving	ourself or your dependents, that is not reimbursed by in excess of the amount entered in Line 19B. <b>Do not</b>	\$	
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.			
33	Total Expenses Allowed under IRS Standards. Enter t	he total of Lines 19 through 32.	\$	
	Note: Do not include any experiments the categories set out in lines a-c below that are reasonable dependents.			
34	a. Health Insurance	\$		
	b. Disability Insurance	\$		
	c. Health Savings Account	\$	\$	
	Total and enter on Line 34.  If you do not actually expend this total amount, state you below:  \$	our actual total average monthly expenditures in the space		
35	Continued contributions to the care of household or far expenses that you will continue to pay for the reasonable ill, or disabled member of your household or member of y expenses.	\$		
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.			
38	Education expenses for dependent children less than 18 actually incur, not to exceed \$156.25* per child, for attend school by your dependent children less than 18 years of a documentation of your actual expenses, and you must decessary and not already accounted for in the IRS Sta	dance at a private or public elementary or secondary ge. You must provide your case trustee with explain why the amount claimed is reasonable and	\$	

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				\$
40	Continued charitable contributions. financial instruments to a charitable or	\$			
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40				
	S	ubpart C: Deductions for De	bt Payment		
42	Future payments on secured claims. own, list the name of the creditor, iden check whether the payment includes ta scheduled as contractually due to each case, divided by 60. If necessary, list a Payments on Line 42.	tify the property securing the debt, sta exes or insurance. The Average Month Secured Creditor in the 60 months fo	ate the Average Montally Payment is the totallowing the filing of the state of the	hly Payment, and all of all amounts he bankruptcy	
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.		\$	□yes □no	
			Total: Add Lines		\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.  Name of Creditor  Property Securing the Debt  1/60th of the Cure Amount				
	a.	1 3 2	\$		
44	Payments on prepetition priority cla priority tax, child support and alimony not include current obligations, such	claims, for which you were liable at t	y 60, of all priority cl		\$
	Chapter 13 administrative expenses. chart, multiply the amount in line a by				
45	issued by the Executive Office information is available at www.	apter 13 plan payment.  Strict as determined under schedules of United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of	\$   x		
	the bankruptcy court.) c. Average monthly administrative	ve expense of chapter 13 case	Total: Multiply Lin	es a and b	\$
46	<b>Total Deductions for Debt Payment.</b>	Enter the total of Lines 42 through 45	5.		\$
	Subpart D: Total Deductions from Income				
47	47 <b>Total of all deductions allowed under § 707(b)(2).</b> Enter the total of Lines 33, 41, and 46.				\$
	Part VI. DE	TERMINATION OF § 707(t	o)(2) PRESUMP	TION	
48	Enter the amount from Line 18 (Cur	\$			
49	Enter the amount from Line 47 (Total	al of all deductions allowed under §	707(b)(2))		\$
50	Monthly disposable income under §	707(b)(2). Subtract Line 49 from Line	e 48 and enter the resu	ılt.	\$
51	60-month disposable income under §	707(b)(2). Multiply the amount in Li	ne 50 by the number	60 and enter the	s

	Initial presumption determination. Check the applicable box and proceed as directed.				
52	☐ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.				
32	$\square$ The amount set forth on Line 51 is more than \$12,475* Check the box for "statement, and complete the verification in Part VIII. You may also complete Part VIII.				
	☐ The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Co	omplete the remainder of Part VI (I	ines 53 through 55).		
53	Enter the amount of your total non-priority unsecured debt		\$		
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number	er 0.25 and enter the result.	\$		
	Secondary presumption determination. Check the applicable box and proceed a	as directed.			
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box of this statement, and complete the verification in Part VIII.	for "The presumption does not aris	e" at the top of page 1		
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. of page 1 of this statement, and complete the verification in Part VIII. You may a		on arises" at the top		
	Part VII. ADDITIONAL EXPENSE	CLAIMS			
56	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.				
	Expense Description	Monthly Amou	nt		
	a.	\$			
	b.	\$			
	c.	\$			
	d.	\$			
	Total: Add Lines a, b, c, and d	\$			
	Part VIII. VERIFICATION	V			
	I declare under penalty of perjury that the information provided in this statement	is true and correct. (If this is a join	t case, both debtors		
57	must sign.)  Date: December 31, 2013 Signature: /s/ Gregory Mitchell Owens				
3,	Gregory Mitchell Owens (Debtor)				
		(=====)			

<sup>\*</sup> Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.